

Comprehensive Strategy for Lucas County Children & Families



Volume 2, Issue 5 September 2002

Our Mission: Engaging the community in enacting the Comprehensive Strategy initiatives through education, promoting collaboration, and providing resources for planning.

This Month's Focus: Data Sources

ADAS STUDENT SURVEY 2002 - EXECUTIVE SUMMARY

The results of the seventh biennial Alcohol and Drug Addiction Services (ADAS) Board of Lucas County Student Survey of Alcohol and Other Drug Use suggest that the long-term rise in youth substance use continues to decline. The results of the 2002 survey are based on a sample of 34,165 students in grades five through 12. Surveys were distributed to students in Toledo, Lucas County, and the surrounding communities during the winter of 2002. Selected results of this year's findings are on pages two and three.

- From the 2002 ADAS Survey Report by Dr. Nick Piazza and Dr. William Ivoska. For more information or for copies of the complete summary, call the Lucas County ADAS Board at 419.213.4235

MONITORING THE FUTURE

The University of Michigan conducts this ongoing study of the behaviors, attitudes, and values of American secondary school students, college students, and young adults. Each year, a total of some 50,000 8th, 10th and 12th grade students are surveyed (12th graders since 1975, and 8th and 10th graders since 1991.) In addition, annual follow-up questionnaires are mailed to a sample of each graduating class for a number of years after their initial participation. *National Survey Results on Drug Use, 1975-2001, Volumes I & II,* and *Overview of Key Findings, 2001* are available.

- From http://monitoringthefuture.org/

YOUTH RISK BEHAVIOR SURVEILLANCE SYSTEM

Before the 1990s, little was known about the prevalence of behaviors practiced by young people that put their health at risk. The Youth Risk Behavior Surveillance System (YRBSS) now provides such information. Developed by the Center for Disease Control in collaboration with federal, state, and private-sector partners, this voluntary system includes a national survey and surveys conducted by state and local education and health agencies. The YRBSS provides vital information on risk behaviors among young people to more effectively target and improve health programs. With technical assistance from CDC, staff of state and local departments of education and health conduct a YRBS every 2 years. School-based surveys were last conducted in 1999 among students in grades 9–12 in 42 states, 16 large cities, and 4 territories. The average sample size was 2,200.

OUR VISION

Lucas County will be a community...

- ☐ That supports parents in caring for their children.
- ☐ Where families set their own goals and provide a loving, nurturing, supportive and safe environment.
- ☐ Where parents are the primary service specialists for their children and will provide opportunities for their growth.
- ☐ Where the community will support parents with the necessary assistance for the care and nurturing of their children.

SP

SPOTLIGHT

on Data Sources:

- ADAS Student Survey selected results pgs 2 & 3
- Lucas County Health & Demographic Profile page 2
- Data Evaluation Network page 3

- From http://www.cdc.gov/nccdphp/dash/yrbs/index.htm

PRIDE SURVEYS

Since 1982, more than 7,500 school systems in 49 states have used the PRIDE questionnaire. More than 7.5 million students in grades 4-12 have completed the questionnaire and their responses are now part of the archives maintained by PRIDE Surveys. These archives form the world's largest database on student use of illicit drugs, alcohol, tobacco products, and violence.

-From http://www.pridesurveys.com/

ADAS 2002 Student Survey Appendices - selected results

					Grade					
Substance	Year	5	6	7	8	9	10	11	12	
Cigarettes	1990	3.9	5.8	10.6	17.2	22.5	27.7	37.1	34.4	
(past 30 days)	1992	3.9	7.3	13.2	17.8	24.9	29.0	34.2	35.5	
	1994	5.8	10.3	17.7	23.9	28.7	32.3	36.8	41.4	
	1996	4.1	10.2	16.2	26.8	32.6	35.5	38.3	42.4	
	1998	4.7	8.4	18.1	26.8	28.9	36.0	42.0	39.1	
	2000	2.0	3.5	9.6	14.7	23.7	30.7	32.0	38.0	
	2002	2.3	3.5	4.7	7.8	14.8	17.9	22.7	29.2	
Alcohol	1990	19.3	25.7	36.2	50.5	63.9	72.3	81.6	82.6	
(past year)	1992	24.1	29.9	43.0	56.7	64.8	71.6	77.0	80.5	
	1994	24.6	33.1	41.3	53.8	62.5	71.6	76.6	80.5	
	1996	11.5	19.7	40.1	58.4	65.8	73.8	76.8	82.8	
	1998	9.8	18.6	38.6	54.0	62.0	69.8	75.5	77.3	
	2000	13.8	19.6	31.6	45.8	58.3	66.8	70.8	76.1	
	2002	13.0	18.5	31.0	39.8	52.4	63.0	69.1	74.7	
				10.1		10.0	10.0			
Alcohol	1996			19.4	33.3	42.3	48.0	52.6	59.8	
(past month)	1998			17.6	28.1	36.7	46.7	51.8	52.9	
	2000			14.3	23.9	35.6	44.6	49.9	55.3	
	2002		-	14.4	19.9	30.1	41.1	44.3	52.4	
Marijuana	1990	0.7	1.6	3.2	7.0	14.0	19.9	28.3	30.0	
(past year)	1992			4.9	8.6	13.8	19.7	25.8	28.6	
,	1994	2.0	3.1	11.4	18.1	23.8	29.4	34.8	39.1	
	1996	2.5	6.0	11.2	21.6	32.1	40.8	42.8	46.9	
	1998	2.7	6.3	13.2	23.7	31.1	40.7	44.2	42.4	
	2000	1.3	2.5	7.1	13.0	27.0	34.7	39.2	42.6	
	2002	2.1	3.2	6.9	12.0	24.7	30.1	38.3	40.7	
Ecstasy	2002			1.1	2.9	4.4	5.5	7.9	9.2	
(past year)	2002			1.1	2.5	7.7	5.5	7.5	5.2	
(past year)										
Designer Drugs	2002			0.6	1.3	2.4	2.2	3.1	3.6	
(past year)										
Painkillers	2002			8.1	11.3	13.7	17.3	19.0	18.0	
(past year)					-					
Cough meds	2002			12.6	13.2	15.8	15.1	13.9	12.8	
(past year)	2002			.2.3	.0.2	.0.0	.0.1	10.0	.2.0	
(Pace Jour)										

Note:

- Data was gathered from 34,165 Lucas County students who were in attendance on the days the survey was administered (February/March 2002), so students who were ill, suspended, etc., were not included.
- Survey is self-reported, but a number of validating questions are used to eliminate inconsistent responses.
- Questions mirror those used by the University of Michigan's *Monitoring the Future* survey.
- Additional categories and further breakdown of results (by gender, race) are included in the complete Executive Summary, available from the Lucas County ADAS Board, 419.213.4235.

- From the 2002 ADAS Student Survey compiled by Dr. William Ivoska and Dr. Nick Piazza

Lucas County Health and Demographic Profile available on CD

The Healthy Communities Foundation of the Hospital Council of Northwest Ohio has compiled over 400 pages of statistical information on Lucas County residents in the categories of abortion; accidents; births; teen births; population demographics; economic issues; education; environment issues; migrant issues; mortality issues, and a miscellaneous category which includes blood pressure; DRG; ICD-9; sexually transmitted diseases, and blood lead level information.

The Profile is presented in a Microsoft PowerPoint format (a free PowerPoint viewer is available at www.microsoft.com). The CD can be used to view or print out information for grant writing, reference, press releases, planning, and much more.

To obtain a Profile CD for \$20 (cost of materials, shipping and handling), contact Kathy Silvestri, 419.842.0800.

- From the Healthy Communities Foundation newsletter, August 2002

ADAS Survey: High Risk Behavior by Grade

	Grade												
Year	7	8	9	10	11	12	Total						
Missed school because of alcohol or other drug use													
2002	3.2	4.8	8.0	7.4	9.6	10.8	6.9						
Ever gone to school after using alcohol or other drugs													
2002	5.2	8.9	14.6	16.2	19.7	20.3	13.3						
Ever used alcohol or other drugs while in school													
2002	3.0	5.0	7.7	9.0	10.0	9.4	7.0						
Ever inject drugs													
2002	0.5	0.6	0.8	1.1	1.1	1.2	0.8						
Ever been a passenger in a car with a driver who just drank													
alcohol or smoked marijuana													
2002	25.7	29.4	39.7	47.7	51.4	55.4	39.8						
Ever drove after drinking													
2002	3.0	3.8	6.0	9.2	20.0	29.8	10.3						
Ever drove after smoking marijuana													
2002	2.3	3.6	6.9	9.4	19.9	26.2	9.9						

Data Evaluation Network

Background

The central focus of the Lucas County Family Council (LCFC) is to create, improve, increase and promote a seamless system of care for children and families throughout Lucas County.

According to the Ohio Revised Code (ORC) § 121.37 the LCFC is charged with inventing new approaches to achieve better results for families and children; developing & implementing a process that maintains a system of accountability; improving the response of different agencies to the needs of children and families; and, ensuring ongoing input from a broad range of families who are receiving services with the county system.

Fundamental to successfully achieving these responsibilities is the on-going collection of data and information on community programs and services. Therefore, the LCFC is convening a new committee comprised of data, research and/or program evaluation specialists from the various public and private systems represented on the Council.

Purpose

The purpose of the Lucas County Family Council Data and Evaluation Network (DEN) is to establish a development round-table under Council. The primary function of the DEN is to coordinate the systematic collection of data and information for community planning and evaluation purposes.

Community Benefits

The creation of the DEN not only benefits the Family Council but also each county public and private agency participating in this collaborative effort. The network establishes a foundation to support new research and evaluation efforts. These efforts could be for community-wide development as well as system-specific improvement and advancement.

Projects

Here's a list of projects the DEN is currently planning to undertake:

- An annual report on the status of children & families in Lucas County
- A web site making county data available to the public through links and/or down-loadable data sets



Children's Defense Fund
•www.childrensdefense.org
Uncle Webster's Parenting News
•http://sonoma.unclewebster.com/
parents/news/index.shtml

- Computer mapping of community programs and services
- Development of cross-systems data collection and sharing protocol
 - For more information, contact Kristen Kania, Lucas County Family Council, 419.213.6987, or e-mail kkania@co.lucas.oh.us

LOCAL RISK FACTORS

Favorable Parental Attitudes & Involvement in the Problem Behavior:

- Indicators:
- ☐ Adult violent crime arrests
- ☐ Adult drug offense arrests

Friends Who Engage in the Problem Behavior:

- Indicators:
- ☐ Alcohol use in 8th, 10th & 12th grades
- ☐ Marijuana use in 8th, 10th & 12th grades
- ☐ Cigarette use in 8th, 10th & 12th grades
- ☐ Cocaine use in 8th, 10th & 12th grades
- ☐ Teen pregnancy rates

Academic Failure Beginning in Elementary School:

- Indicators:
- ☐ Drop-out rate
- ☐ Graduation rate
- Reading proficiency
- Math proficiency

Early Initiation to Problem Behavior:

- Indicators:
- ☐ Alcohol use in early grades
- ☐ Marijuana use in early grades
- ☐ Cigarette use in early grades
- ☐ Cocaine use in early grades

Family Management Problems:

- Indicators:
- ☐ Number of children in substitute care
- Incidences of substantiated child abuse or neglect
 - -based on local data gathered for the community report on A Comprehensive Strategy for Lucas County Children & Families, 1999

The Community Partnership 5902 Southwyck Blvd., Suite 100 Toledo, Ohio 43614 www.communityprevention.org

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Comprehensive Strategy for Lucas County Children & Families

The Comprehensive Strategy for Lucas County
Children & Families newsletter is a cooperative effort of many
agencies throughout the county. For copies of the initial report or data
CD, or to join the mailing list, contact The Community Partnership at
419.866.3611, 5902 Southwyck Blvd., Toledo, Ohio 43614 or e-mail
Cyndi@communityprevention.org. For specific Comp Strategy questions, call Kristen Kania at Lucas County Family Council,
419.213.6994, or e-mail kkania@co.lucas.oh.us

OVERVIEW OF COMPREHENSIVE STRATEGY Problem Behavior Noncriminal Misbehavior Delinquency Serious, Violent & Chronic Offending **Graduated Sanctions** Prevention Target Population: At-Risk Youth Target Population: Delinquent Youth Intermediate [Community Confinement Training Schools Programs for Programs for Youth Immediate Aftercare П All Youth at Greatest Risk Sanctions Youth Development Goals: Youth Habilitation Goals: Healthy family participation Healthy and nurturing families Safe communities Community reintegration School attachment Educational success and skills development • Healthy peer network development Prosocial peer relations Personal development and life skills Prosocial values development Healthy lifestyle choices Healthy lifestyle choices